N8114 CALVARY STREET MOUNT CALVARY Phone: (920) 753-3211 Ownershi p: Non-Profit Church Related 53057 Operated from 1/1 To 12/31 Days of Operation: 366 Highest Level License: Skilled Operate in Conjunction with Hospital? No Operate in Conjunction with CBRF? No Number of Beds Set Up and Staffed (12/31/00): **52** Title 18 (Medicare) Certified? Yes Total Licensed Bed Capacity (12/31/00): **52** Average Daily Census: 51 Number of Residents on 12/31/00: **52**

Services Provided to Non-Residents		Age, Sex, and Primary Diagn	osis of	Residents (12/3	1/00)	Length of Stay (12/31/00)	%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year	26. 9
Supp. Home Care-Personal Care	No					1 - 4 Years	55. 8
Supp. Home Care-Household Services	No	Developmental Disabilities	1. 9	Under 65	3.8	More Than 4 Years	17. 3
Day Services	No	Mental Illness (Org./Psy)	51.9	65 - 74	7.7		
Respite Care	No	Mental Illness (Other)	3.8	75 - 84	30. 8		100. 0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	50. 0	***************	******
Adult Day Health Care	No	Para-, Quadra-, Hemi plegic	0.0	95 & 0ver	7.7	Full-Time Equivalen	t
Congregate Meals	No	Cancer	0.0			Nursing Staff per 100 Re	si dents
Home Delivered Meals	No	Fractures	0.0		100.0	(12/31/00)	
Other Meals	No	Cardi ovascul ar	5.8	65 & 0ver	96. 2		
Transportation	No	Cerebrovascul ar	5.8			RNs	11.6
Referral Service	No	Diabetes	1. 9	Sex	%	LPNs	1.8
Other Services	No	Respi ratory	3.8			Nursing Assistants	
Provi de Day Programming for		Other Medical Conditions	25.0	Male	21. 2	Aides & Orderlies	38. 9
Mentally Ill	No			Female	78. 8		
Provide Day Programming for		ĺ	100.0				
Developmentally Disabled	No				100. 0	1	
**********	****	**********	*****	******	******	********	*****

Method of Reimbursement

County: Fond Du Lac

VILLA LORETTO NURSING HOME

	Medicare (Title 18)			(Medicaid (Title 19)			0ther			Private Pay			Managed Care			Percent
		(11 61 6	Per Die		(11 61 6	Per Die	m	ocii	Per Die			Per Diem		0	Per Diem	Total	Of All
Level of Care	No.	%	Rate	No.	%	Rate	No.	%	Rate	No.	%	Rate	No.	%	Rate	No.	Resi dents
Int. Skilled Care	0	0. 0	\$0.00	0	0. 0	\$0.00	0	0. 0	\$0.00	0	0. 0	\$0.00	0	0. 0	\$0.00	0	0. 0%
Skilled Care	0	0. 0	\$0.00	36 1	100. 0	\$101.16	0	0.0	\$0.00	13	81. 3	\$134.50	0	0. 0	\$0.00	49	94. 2%
Intermediate				0	0.0	\$0.00	0	0.0	\$0.00	3	18. 8	\$129.50	0	0. 0	\$0.00	3	5.8%
Limited Care				0	0.0	\$0.00	0	0. 0	\$0.00	0	0.0	\$0.00	0	0. 0	\$0.00	0	0.0%
Personal Care				0	0. 0	\$0.00	0	0. 0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Residential Care				0	0. 0	\$0.00	0	0. 0	\$0.00	0	0.0	\$0.00	0	0. 0	\$0.00	0	0.0%
Dev. Di sabl ed				0	0. 0	\$0.00	0	0. 0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Traumatic Brain Inj	i. 0	0.0	\$0.00	0	0. 0	\$0.00	0	0. 0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Ventilator-Dependen	nt 0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Total	0	0. 0		36 1	100. 0		0	0. 0		16	100.0		0	0. 0		52	100.0%

VILLA LORETTO NURSING HOME

Admissions, Discharges, and		Percent Distribution	n of Residents'	Condi t	i ons, Servi ces,	and Activities as of 12/	31/00
Deaths During Reporting Period							
					% Needi ng		Total
Percent Admissions from:		Activities of	%	As	sistance of	% Totally	Number of
Private Home/No Home Health	18. 5	Daily Living (ADL)	Independent	0ne	Or Two Staff	Dependent	Resi dents
Private Home/With Home Health	3. 7	Bathi ng	3. 8		69. 2	26. 9	52
Other Nursing Homes	40.7	Dressi ng	5. 8		73. 1	21. 2	52
Acute Care Hospitals	33. 3	Transferring	30. 8		51. 9	17. 3	52
Psych. HospMR/DD Facilities	0.0	Toilet Use	23. 1		59. 6	17. 3	52
Rehabilitation Hospitals	0.0	Eati ng	42. 3		44. 2	13. 5	52
Other Locations	3. 7	*************	**********	******	**********	**********	******
Total Number of Admissions	27	Continence		%	Special Treat	ments	%
Percent Discharges To:		Indwelling Or Extern	nal Catheter	1.9	Receiving F	despi ratory Care	7. 7
Private Home/No Home Health	0.0	0cc/Freq. Incontine	nt of Bladder	61.5	Recei vi ng T	Cracheostomy Care	0. 0
Private Home/With Home Health	3. 7	0cc/Freq. Incontine	nt of Bowel	36. 5	Recei vi ng S	Sucti oni ng	0. 0
Other Nursing Homes	0.0				Receiving 0	Ostomy Care	3. 8
Acute Care Hospitals	33. 3	Mobility			Recei vi ng T	Tube Feeding	1. 9
Psych. HospMR/DD Facilities	0.0	Physically Restrain	ed	7. 7	Receiving N	Aechanically Altered Diets	25. 0
Rehabilitation Hospitals	0. 0	ĺ			_	-	
Other Locations	0.0	Skin Care			Other Resider	nt Characteristics	
Deaths	63. 0	With Pressure Sores		1. 9	Have Advance	ce Directives	80. 8
Total Number of Discharges		With Rashes		11. 5	Medi cati ons		
(Including Deaths)	27	İ			Receiving F	Sychoactive Drugs	59. 6

Ownership: Bed Size: Li censure: 50-99 Thi s Nonprofit Skilled Al l Facility Peer Group Peer Group Peer Group Facilities % % Ratio % Ratio Ratio % Ratio Occupancy Rate: Average Daily Census/Licensed Beds 98. 1 92.8 1.06 86.6 1. 13 87. 0 1.13 84. 5 1. 16 77.5 Current Residents from In-County 71. 2 73.6 0.97 69.4 1.02 69.3 1.03 0.92 Admissions from In-County, Still Residing 48. 1 26.8 1.80 19. 5 2.47 22.3 2.16 21.5 2. 24 Admissions/Average Daily Census 52.9 86. 5 0.61 130.0 0.41 104. 1 0.51 124.3 0.43 Discharges/Average Daily Census 52.9 83.8 0.63 129.6 0.41 105. 4 0.50 126. 1 0.42 Discharges To Private Residence/Average Daily Census 2.0 28.3 0.07 47.7 0.04 37. 2 0.05 49.9 0.04 Residents Receiving Skilled Care 94. 2 89.0 1.06 1.05 87. 6 1.13 89. 9 1.08 83.3 Residents Aged 65 and Older 96. 2 97.3 0.99 95.4 1.01 93. 4 1.03 87.7 1. 10 Title 19 (Medicaid) Funded Residents 69. 2 67.3 1.03 68.7 1.01 70.7 69.0 1.00 0.98 Private Pay Funded Residents 30.8 27. 1 1.14 22.6 1.36 22.6 1.36 22. 1 1.39 Developmentally Disabled Residents 1.9 0.4 4.38 0.7 2.69 0.7 2.70 7.6 0. 25 Mentally Ill Residents 55.8 32.8 1.70 35.9 1.55 37. 4 1.49 33. 3 1.67 General Medical Service Residents 25. 0 22.4 1.12 1. 24 20. 1 21. 1 1.18 18. 4 1.36 49.6 1.01 1.04 47.0 49. 4 Impaired ADL (Mean) 49.0 47.7 1.06 1.00 59.6 46.3 1.29 1.21 49.6 1.20 50. 1 1. 19 Psychological Problems 49.3 0.85 0.99 Nursing Care Required (Mean) 6. 5 7.6 6.6 7.0 0.92 7. 2 0.91